## MEMBERSHIP APPLICATION



The Cancer Alliance of Texas is open to any individual who subscribes and commits to the mission of the Cancer Alliance of Texas.

**Mission:** To engage organizations, agencies, institutions, and individuals to work collaboratively to reduce the impact of cancer in Texas and promote the *Texas Cancer Plan*.

Members may represent public, private, and non-profit organizations, or themselves as citizens, volunteers, or survivors.

**Instructions:** Please complete this application and review the member expectations. Save your completed application before submitting it.

Contact Information		
Name and credentials:		
Title:		
Organization:		
Address, if applicable:		
City, State, and Zip code:		
Phone:		
Email:		
Website:		
Areas of Expertise		
Please indicate your area(s) of expertise.		
□ Advocacy	☐ Evaluation	□ Research
☐ Collaborations	☐ Fundraising	<ul><li>☐ Strategic Planning and Implementation</li><li>☐ Other (please specify):</li></ul>
□ Community	☐ Grant Writing	
Development	☐ Government Relations	
☐ Cultural Competency	☐ Marketing and	
□ Data Analysis	Communications	

What are your organization's or individual cancer-related goals?

Please tell us how you learned about the Cancer Alliance of Texas and why you are interested in joining.

## **Priority Area Workgroups/Operational Committees**

Priority area workgroups address priority issues related to the *Texas Cancer Plan*, and operational committees address the administrative and operating issues of the Cancer Alliance of Texas. Members are expected to participate in at least one priority area workgroup and/or an operational committee according to interest.

Please select the priority area workgroup(s) and/or operational committee(s) you would like to serve on.

## Priority Area Workgroups ☐ Tobacco Control ☐ Screening and Early Detection (breast, cervical, and colorectal cancers) ☐ Survivorship ☐ Cancer Disparities ☐ Operational Committees ☐ Communications Committee ☐ Membership Committee ☐ Nominations Committee

**Member Expectations:** There are no membership dues. However, members of the Cancer Alliance of Texas are expected to:

- Regularly attend meetings in person or remotely
- Provide feedback on matters and vote by consensus
- Actively participate in at least one of the priority area workgroups to help implement the *Texas Cancer Plan (Plan)*
- Serve on operational or ad hoc committees, according to interest

**Application Submission:** To submit your application, email it to Amanda Ivarra at <u>Amanda.Ivarra@dshs.texas.gov</u>.